

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	UT	SL 708	S-11-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1. Final	
2. Original	9/24/02
3. 1	=
4. 2	✓
5. 3	✓
6. 4	✓
7. 5	✓
8. 6	✓
9. 7	✓
10. 8	✓
11. 9	✓
12. 10	=
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Claim	Date
51. Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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